

# HB0916



## 95TH GENERAL ASSEMBLY

### State of Illinois

2007 and 2008

HB0916

Introduced 2/7/2007, by Rep. Mike Fortner

#### SYNOPSIS AS INTRODUCED:

305 ILCS 5/5-5

from Ch. 23, par. 5-5

Amends the Illinois Public Aid Code. Provides that under the Medicaid program, the Department of Healthcare and Family Services shall authorize the provision of, and shall authorize payment for, treatment of cancer by means of proton therapy or neutron therapy at stand-alone clinics. Effective immediately.

LRB095 07705 DRJ 27861 b

FISCAL NOTE ACT  
MAY APPLY

A BILL FOR

1 AN ACT concerning public aid.

2 **Be it enacted by the People of the State of Illinois,**  
3 **represented in the General Assembly:**

4 Section 5. The Illinois Public Aid Code is amended by  
5 changing Section 5-5 as follows:

6 (305 ILCS 5/5-5) (from Ch. 23, par. 5-5)

7 Sec. 5-5. Medical services. The Illinois Department, by  
8 rule, shall determine the quantity and quality of and the rate  
9 of reimbursement for the medical assistance for which payment  
10 will be authorized, and the medical services to be provided,  
11 which may include all or part of the following: (1) inpatient  
12 hospital services; (2) outpatient hospital services; (3) other  
13 laboratory and X-ray services; (4) skilled nursing home  
14 services; (5) physicians' services whether furnished in the  
15 office, the patient's home, a hospital, a skilled nursing home,  
16 or elsewhere; (6) medical care, or any other type of remedial  
17 care furnished by licensed practitioners; (7) home health care  
18 services; (8) private duty nursing service; (9) clinic  
19 services; (10) dental services, including prevention and  
20 treatment of periodontal disease and dental caries disease for  
21 pregnant women; (11) physical therapy and related services;  
22 (12) prescribed drugs, dentures, and prosthetic devices; and  
23 eyeglasses prescribed by a physician skilled in the diseases of

1 the eye, or by an optometrist, whichever the person may select;  
2 (13) other diagnostic, screening, preventive, and  
3 rehabilitative services; (14) transportation and such other  
4 expenses as may be necessary; (15) medical treatment of sexual  
5 assault survivors, as defined in Section 1a of the Sexual  
6 Assault Survivors Emergency Treatment Act, for injuries  
7 sustained as a result of the sexual assault, including  
8 examinations and laboratory tests to discover evidence which  
9 may be used in criminal proceedings arising from the sexual  
10 assault; (16) the diagnosis and treatment of sickle cell  
11 anemia; and (17) any other medical care, and any other type of  
12 remedial care recognized under the laws of this State, but not  
13 including abortions, or induced miscarriages or premature  
14 births, unless, in the opinion of a physician, such procedures  
15 are necessary for the preservation of the life of the woman  
16 seeking such treatment, or except an induced premature birth  
17 intended to produce a live viable child and such procedure is  
18 necessary for the health of the mother or her unborn child. The  
19 Illinois Department, by rule, shall prohibit any physician from  
20 providing medical assistance to anyone eligible therefor under  
21 this Code where such physician has been found guilty of  
22 performing an abortion procedure in a wilful and wanton manner  
23 upon a woman who was not pregnant at the time such abortion  
24 procedure was performed. The term "any other type of remedial  
25 care" shall include nursing care and nursing home service for  
26 persons who rely on treatment by spiritual means alone through

1 prayer for healing.

2 Notwithstanding any other provision of this Section, a  
3 comprehensive tobacco use cessation program that includes  
4 purchasing prescription drugs or prescription medical devices  
5 approved by the Food and Drug administration shall be covered  
6 under the medical assistance program under this Article for  
7 persons who are otherwise eligible for assistance under this  
8 Article.

9 Notwithstanding any other provision of this Code, the  
10 Illinois Department may not require, as a condition of payment  
11 for any laboratory test authorized under this Article, that a  
12 physician's handwritten signature appear on the laboratory  
13 test order form. The Illinois Department may, however, impose  
14 other appropriate requirements regarding laboratory test order  
15 documentation.

16 The ~~Illinois~~ Department of Healthcare and Family Services  
17 ~~Public Aid~~ shall provide the following services to persons  
18 eligible for assistance under this Article who are  
19 participating in education, training or employment programs  
20 operated by the Department of Human Services as successor to  
21 the Department of Public Aid:

22 (1) dental services, which shall include but not be  
23 limited to prosthodontics; and

24 (2) eyeglasses prescribed by a physician skilled in the  
25 diseases of the eye, or by an optometrist, whichever the  
26 person may select.

1           The Illinois Department, by rule, may distinguish and  
2 classify the medical services to be provided only in accordance  
3 with the classes of persons designated in Section 5-2.

4           The Illinois Department shall authorize the provision of,  
5 and shall authorize payment for, screening by low-dose  
6 mammography for the presence of occult breast cancer for women  
7 35 years of age or older who are eligible for medical  
8 assistance under this Article, as follows: a baseline mammogram  
9 for women 35 to 39 years of age and an annual mammogram for  
10 women 40 years of age or older. All screenings shall include a  
11 physical breast exam, instruction on self-examination and  
12 information regarding the frequency of self-examination and  
13 its value as a preventative tool. As used in this Section,  
14 "low-dose mammography" means the x-ray examination of the  
15 breast using equipment dedicated specifically for mammography,  
16 including the x-ray tube, filter, compression device, image  
17 receptor, and cassettes, with an average radiation exposure  
18 delivery of less than one rad mid-breast, with 2 views for each  
19 breast.

20           The Department of Healthcare and Family Services shall  
21 authorize the provision of, and shall authorize payment for,  
22 treatment of cancer by means of proton therapy or neutron  
23 therapy at stand-alone clinics.

24           Any medical or health care provider shall immediately  
25 recommend, to any pregnant woman who is being provided prenatal  
26 services and is suspected of drug abuse or is addicted as

1 defined in the Alcoholism and Other Drug Abuse and Dependency  
2 Act, referral to a local substance abuse treatment provider  
3 licensed by the Department of Human Services or to a licensed  
4 hospital which provides substance abuse treatment services.  
5 The Department of Healthcare and Family Services ~~Public Aid~~  
6 shall assure coverage for the cost of treatment of the drug  
7 abuse or addiction for pregnant recipients in accordance with  
8 the Illinois Medicaid Program in conjunction with the  
9 Department of Human Services.

10 All medical providers providing medical assistance to  
11 pregnant women under this Code shall receive information from  
12 the Department on the availability of services under the Drug  
13 Free Families with a Future or any comparable program providing  
14 case management services for addicted women, including  
15 information on appropriate referrals for other social services  
16 that may be needed by addicted women in addition to treatment  
17 for addiction.

18 The Illinois Department, in cooperation with the  
19 Departments of Human Services (as successor to the Department  
20 of Alcoholism and Substance Abuse) and Public Health, through a  
21 public awareness campaign, may provide information concerning  
22 treatment for alcoholism and drug abuse and addiction, prenatal  
23 health care, and other pertinent programs directed at reducing  
24 the number of drug-affected infants born to recipients of  
25 medical assistance.

26 Neither the ~~Illinois~~ Department of Healthcare and Family

1 Services ~~Public Aid~~ nor the Department of Human Services shall  
2 sanction the recipient solely on the basis of her substance  
3 abuse.

4 The Illinois Department shall establish such regulations  
5 governing the dispensing of health services under this Article  
6 as it shall deem appropriate. The Department should seek the  
7 advice of formal professional advisory committees appointed by  
8 the Director of the Illinois Department for the purpose of  
9 providing regular advice on policy and administrative matters,  
10 information dissemination and educational activities for  
11 medical and health care providers, and consistency in  
12 procedures to the Illinois Department.

13 The Illinois Department may develop and contract with  
14 Partnerships of medical providers to arrange medical services  
15 for persons eligible under Section 5-2 of this Code.  
16 Implementation of this Section may be by demonstration projects  
17 in certain geographic areas. The Partnership shall be  
18 represented by a sponsor organization. The Department, by rule,  
19 shall develop qualifications for sponsors of Partnerships.  
20 Nothing in this Section shall be construed to require that the  
21 sponsor organization be a medical organization.

22 The sponsor must negotiate formal written contracts with  
23 medical providers for physician services, inpatient and  
24 outpatient hospital care, home health services, treatment for  
25 alcoholism and substance abuse, and other services determined  
26 necessary by the Illinois Department by rule for delivery by

1 Partnerships. Physician services must include prenatal and  
2 obstetrical care. The Illinois Department shall reimburse  
3 medical services delivered by Partnership providers to clients  
4 in target areas according to provisions of this Article and the  
5 Illinois Health Finance Reform Act, except that:

6 (1) Physicians participating in a Partnership and  
7 providing certain services, which shall be determined by  
8 the Illinois Department, to persons in areas covered by the  
9 Partnership may receive an additional surcharge for such  
10 services.

11 (2) The Department may elect to consider and negotiate  
12 financial incentives to encourage the development of  
13 Partnerships and the efficient delivery of medical care.

14 (3) Persons receiving medical services through  
15 Partnerships may receive medical and case management  
16 services above the level usually offered through the  
17 medical assistance program.

18 Medical providers shall be required to meet certain  
19 qualifications to participate in Partnerships to ensure the  
20 delivery of high quality medical services. These  
21 qualifications shall be determined by rule of the Illinois  
22 Department and may be higher than qualifications for  
23 participation in the medical assistance program. Partnership  
24 sponsors may prescribe reasonable additional qualifications  
25 for participation by medical providers, only with the prior  
26 written approval of the Illinois Department.



1           Nothing in this Section shall limit the free choice of  
2 practitioners, hospitals, and other providers of medical  
3 services by clients. In order to ensure patient freedom of  
4 choice, the Illinois Department shall immediately promulgate  
5 all rules and take all other necessary actions so that provided  
6 services may be accessed from therapeutically certified  
7 optometrists to the full extent of the Illinois Optometric  
8 Practice Act of 1987 without discriminating between service  
9 providers.

10           The Department shall apply for a waiver from the United  
11 States Health Care Financing Administration to allow for the  
12 implementation of Partnerships under this Section.

13           The Illinois Department shall require health care  
14 providers to maintain records that document the medical care  
15 and services provided to recipients of Medical Assistance under  
16 this Article. The Illinois Department shall require health care  
17 providers to make available, when authorized by the patient, in  
18 writing, the medical records in a timely fashion to other  
19 health care providers who are treating or serving persons  
20 eligible for Medical Assistance under this Article. All  
21 dispensers of medical services shall be required to maintain  
22 and retain business and professional records sufficient to  
23 fully and accurately document the nature, scope, details and  
24 receipt of the health care provided to persons eligible for  
25 medical assistance under this Code, in accordance with  
26 regulations promulgated by the Illinois Department. The rules

1 and regulations shall require that proof of the receipt of  
2 prescription drugs, dentures, prosthetic devices and  
3 eyeglasses by eligible persons under this Section accompany  
4 each claim for reimbursement submitted by the dispenser of such  
5 medical services. No such claims for reimbursement shall be  
6 approved for payment by the Illinois Department without such  
7 proof of receipt, unless the Illinois Department shall have put  
8 into effect and shall be operating a system of post-payment  
9 audit and review which shall, on a sampling basis, be deemed  
10 adequate by the Illinois Department to assure that such drugs,  
11 dentures, prosthetic devices and eyeglasses for which payment  
12 is being made are actually being received by eligible  
13 recipients. Within 90 days after the effective date of this  
14 amendatory Act of 1984, the Illinois Department shall establish  
15 a current list of acquisition costs for all prosthetic devices  
16 and any other items recognized as medical equipment and  
17 supplies reimbursable under this Article and shall update such  
18 list on a quarterly basis, except that the acquisition costs of  
19 all prescription drugs shall be updated no less frequently than  
20 every 30 days as required by Section 5-5.12.

21 The rules and regulations of the Illinois Department shall  
22 require that a written statement including the required opinion  
23 of a physician shall accompany any claim for reimbursement for  
24 abortions, or induced miscarriages or premature births. This  
25 statement shall indicate what procedures were used in providing  
26 such medical services.

1           The Illinois Department shall require all dispensers of  
2 medical services, other than an individual practitioner or  
3 group of practitioners, desiring to participate in the Medical  
4 Assistance program established under this Article to disclose  
5 all financial, beneficial, ownership, equity, surety or other  
6 interests in any and all firms, corporations, partnerships,  
7 associations, business enterprises, joint ventures, agencies,  
8 institutions or other legal entities providing any form of  
9 health care services in this State under this Article.

10           The Illinois Department may require that all dispensers of  
11 medical services desiring to participate in the medical  
12 assistance program established under this Article disclose,  
13 under such terms and conditions as the Illinois Department may  
14 by rule establish, all inquiries from clients and attorneys  
15 regarding medical bills paid by the Illinois Department, which  
16 inquiries could indicate potential existence of claims or liens  
17 for the Illinois Department.

18           Enrollment of a vendor that provides non-emergency medical  
19 transportation, defined by the Department by rule, shall be  
20 conditional for 180 days. During that time, the Department of  
21 Healthcare and Family Services ~~Public Aid~~ may terminate the  
22 vendor's eligibility to participate in the medical assistance  
23 program without cause. That termination of eligibility is not  
24 subject to the Department's hearing process.

25           The Illinois Department shall establish policies,  
26 procedures, standards and criteria by rule for the acquisition,

1 repair and replacement of orthotic and prosthetic devices and  
2 durable medical equipment. Such rules shall provide, but not be  
3 limited to, the following services: (1) immediate repair or  
4 replacement of such devices by recipients without medical  
5 authorization; and (2) rental, lease, purchase or  
6 lease-purchase of durable medical equipment in a  
7 cost-effective manner, taking into consideration the  
8 recipient's medical prognosis, the extent of the recipient's  
9 needs, and the requirements and costs for maintaining such  
10 equipment. Such rules shall enable a recipient to temporarily  
11 acquire and use alternative or substitute devices or equipment  
12 pending repairs or replacements of any device or equipment  
13 previously authorized for such recipient by the Department.

14 The Department shall execute, relative to the nursing home  
15 prescreening project, written inter-agency agreements with the  
16 Department of Human Services and the Department on Aging, to  
17 effect the following: (i) intake procedures and common  
18 eligibility criteria for those persons who are receiving  
19 non-institutional services; and (ii) the establishment and  
20 development of non-institutional services in areas of the State  
21 where they are not currently available or are undeveloped.

22 The Illinois Department shall develop and operate, in  
23 cooperation with other State Departments and agencies and in  
24 compliance with applicable federal laws and regulations,  
25 appropriate and effective systems of health care evaluation and  
26 programs for monitoring of utilization of health care services

1 and facilities, as it affects persons eligible for medical  
2 assistance under this Code.

3 The Illinois Department shall report annually to the  
4 General Assembly, no later than the second Friday in April of  
5 1979 and each year thereafter, in regard to:

6 (a) actual statistics and trends in utilization of  
7 medical services by public aid recipients;

8 (b) actual statistics and trends in the provision of  
9 the various medical services by medical vendors;

10 (c) current rate structures and proposed changes in  
11 those rate structures for the various medical vendors; and

12 (d) efforts at utilization review and control by the  
13 Illinois Department.

14 The period covered by each report shall be the 3 years  
15 ending on the June 30 prior to the report. The report shall  
16 include suggested legislation for consideration by the General  
17 Assembly. The filing of one copy of the report with the  
18 Speaker, one copy with the Minority Leader and one copy with  
19 the Clerk of the House of Representatives, one copy with the  
20 President, one copy with the Minority Leader and one copy with  
21 the Secretary of the Senate, one copy with the Legislative  
22 Research Unit, and such additional copies with the State  
23 Government Report Distribution Center for the General Assembly  
24 as is required under paragraph (t) of Section 7 of the State  
25 Library Act shall be deemed sufficient to comply with this  
26 Section.

1 (Source: P.A. 92-16, eff. 6-28-01; 92-651, eff. 7-11-02;  
2 92-789, eff. 8-6-02; 93-632, eff. 2-1-04; 93-841, eff. 7-30-04;  
3 93-981, eff. 8-23-04; revised 12-15-05.)

4 Section 99. Effective date. This Act takes effect upon  
5 becoming law.